



**Massachusetts Department of Correction
Privileged Mail
in accordance with 103 CMR 481, *Inmate Mail***



CONTROL NUMBER REQUEST FORM

To request a Control Number, transmit this completed form to the Massachusetts Department of Correction at DOC.AVS@doc.state.ma.us, or via USPS, at:

Massachusetts Department of Correction
Office of Communications and Administrative Resolution
C/O Attorney Verification System
50 Maple Street
Milford, MA 01757

Any questions regarding the completion of this form can also be communicated by any of those means or by calling 508-422-3439 or 508-422-3396.

The request will be processed, and a number will be provided via electronic mail within a reasonable time frame and barcodes will be mailed via USPS to the address listed on the Board of Bar Overseers website or out of state equivalent.

If barcodes are stolen or lost, notification must be made to the email address above as soon as possible.

At no time will the ACN or AVS Barcode be shared with an incarcerated individual or any other individual. Attorneys may authorize persons (e.g., paralegals, law students, administrative support persons) working for the attorney to send privileged mail utilizing the attorney's AVS Barcode. The supervising attorney whose AVS Barcode is being utilized assumes all responsibility for the contents of the privileged mail sent.

Requestor's Name:

Board of Bar Overseers Number or out of state equivalent:

Name of Law Firm/Law Office (if applicable):

Telephone Number:

Email Address:

VERIFICATION
(Attorney Requests Only)

I, _____, hereby verify under the pains and penalties of perjury that all privileged mail that I send, or any person under my supervision sends, to Department of Correction incarcerated individuals using the AVS Barcode, shall contain only confidential, attorney-client communications and shall not contain non-privileged communications (e.g., holiday or birthday cards), original documents from third-parties (e.g., documents generated from someone other than the attorney), or contraband.

Date & Signature of Attorney

*A law firm or other law office that has more than one attorney who corresponds with incarcerated individuals must request one ACN for each attorney. Each individual attorney shall utilize their own assigned AVS barcode when sending correspondence to an incarcerated individual. Any correspondence sent to incarcerated individuals from a law firm or other law office with more than one attorney, must have the name of the law firm or law office on the envelope with the ACN.

**MASSACHUSETTS DEPARTMENT OF
CORRECTION USE ONLY**

Date Request Received:

Assigned ACN:

Date Request Returned: